

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

Weekly Bulletin



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GUY P. JONES
EDITOR

Sixth Symposium on Heart Disease

The Heart Committee of the San Francisco County Medical Society will hold its Sixth Annual Symposium on Heart Disease in San Francisco, November 20-21, 1935. There will be morning, afternoon and evening sessions at the University of California, San Francisco, and Stanford University Hospitals, and at the Department of Public Health.

There will be a registration fee of \$5 (five dollars) for the entire course, or \$1 (one dollar) for single sessions, to help support the activities of the Heart Committee in San Francisco. *Physicians who are planning to attend should notify the secretary as soon as possible.* Checks for the registration fee should be made payable to the San Francisco Heart Committee and mailed to Doctor John P. Strickler, Secretary, 604 Mission Street, Room 802, San Francisco, California. A registration card and program will then be mailed to you.

An outline of the program follows:

Wednesday, November 20, 1935.

MORNING SESSION—9.00 a.m. to 12.00 Noon.

University of California Hospital—Toland Hall, Third and Parnassus Avenues.

William J. Kerr, M.D., Presiding.

9.00—9.30. Clinical Diagnosis and Treatment of Cardiac Irregularities.
—John J. Sampson, M.D.

9.30—10.00. Hypertension.
—Dudley W. Bennett, M.D.

10.00—10.45. Clinic on Coronary Occlusion.
—Eugene S. Kilgore, M.D.

- 10.45—11.15. Rheumatic Fever in Northern California.
—Amos U. Christie, M.D.
- 11.15—12.00. Clinic on Extra Cardiac Circulatory Disease.
—William J. Kerr, M.D.

AFTERNOON SESSION—1.30 p.m. to 4.45 p.m.
San Francisco Department of Public Health, 101 Grove Street.

John J. Sampson, M.D., Presiding.

1.30—1.45. Heart Disease as a Public Health Problem.
—J. C. Geiger, M.D.

1.45—2.00. The Completed Morbidity Survey of Heart Disease in San Francisco.
—Jacques P. Gray, M.D.

2.00—2.20. The Purposes and Technique of Cardiac Diagnostic Work in School Children.
—John J. Sampson, M.D.

2.20—2.40. The Incidence of Heart Disease in San Francisco School Children and Relation to the Rheumatic Fever Problem.
—Amos U. Christie, M.D.

2.45—4.45. Seminars on the Interpretation of the Electrocardiogram.
—William Dock, M.D.
—Gordon E. Hein, M.D.
—Eugene S. Kilgore, M.D.
—John B. Lagen, M.D.
—J. Marion Read, M.D.
—Harold H. Rosenblum, M.D.
—John J. Sampson, M.D.

NOTE.—In this session those who register should specify for work in either elementary or advanced study. From four to six small groups will be formed for personal study of problems from the actual records and if desired, individuals may bring to the session problem electrocardiograms encountered in their own work.

EVENING SESSIONS.

(1) University of California Hospital, Third and Parnassus Avenues.

(a) *Toland Hall.*

William J. Kerr, M.D., Presiding.
(Accommodations for 120.)

Bring Your Stethoscope—

7.00 p.m.

30 min. Murmurs.

—William J. Kerr, M.D.
—John B. Lagen, M.D.

20 min. Moving Picture Film of Cardiac Irregularities.

—John B. Lagen, M.D.

10 min. Technique of Electrocardiography.

—John B. Lagen, M.D.
—Miss Hitch.

25 min. Interpretation of Electrocardiograms.

—R. D. Friedlander, M.D.
—F. J. Underwood, M.D.

8.30 p.m. Repetition of Demonstrations.

(b) *Cole Hall*—Third Floor, Medical School Building.
Herbert W. Allen, M.D., Presiding.

(Accommodations for 120.)

Bring Your Stethoscope—

7.00 p.m.

10 min. Pulse Rate—Pulse Pressure Functional Test.

—John J. Sampson, M.D.

10 min. Venous Pressure.

Dudley W. Bennett, M.D.

10 min. Vital Capacity.

—R. F. Escamilla, M.D.

10 min. Circulation Time.

—Harold H. Rosenblum, M.D.

15 min. Adrenalin and Histamine Tests.

—Eric Ogden, M.D.

10 min. Capacity Resistance.

—J. F. Rinehart, M.D.

15 min. Tests for Vasomotor Control.

—Leroy K. Gay, M.D.

—J. T. Hardesty, M.D.

8.30 p.m. Repetition of Demonstrations.

(2) San Francisco Hospital, Twenty-second Street and Potrero Avenue.

Don Carlos Hines, M.D., Presiding.

7.30 p.m. Special Procedures in the Diagnosis and Treatment of Heart Disease. A demonstration of practical bedside methods for Venous Pressure, Thoracentesis, Southey tubes, Oxygen tent, etc.

*Thursday, November 21, 1935.***MORNING SESSION—9.00 a.m. to 12.30 p.m.**Stanford University Hospital—Lane Hall.
William W. Newman, M.D., Presiding.

9.00—9.30. The Management of the Heart After Surgical Operation.

—Arthur L. Bloomfield, M.D.

9.30—10.00. Recent Developments in Surgery of the Circulatory System.

—Emile Holman, M.D.

10.00—10.30. The Basis of Symptoms in Heart Failure.

—William Dock, M.D.

10.30—11.00. The Value to the Clinician of Roentgen Examination of Cardiac Patients.

—Harry Garland, M.D.

11.00—11.30. Some Clinical Features of Angina Pectoris.

—J. K. Lewis, M.D.

11.30—12.30. The Cathode Ray Oscillograph for Registering Heart Sounds and Electrocardiograms.

—William W. Newman, M.D.

—Henry W. Newman, M.D.

AFTERNOON SESSION—2.00 p.m. to 5.00 p.m.

San Francisco Hospital. Twenty-second Street and Potrero Avenue.

Gordon E. Hein, M.D. }
J. Marion Read, M.D. } Presiding.

Clinical and Pathological Demonstrations.
(Details of program to be arranged.)

EVENING SESSION.

San Francisco County Medical Society, 2180 Washington Street, near Laguna.

7.30 p.m. Annual Meeting of San Francisco Heart Committee.

—John J. Sampson, M.D., Presiding.

8.00 p.m. William J. Kerr, M.D., Presiding.

I. Use of Drugs in Cardiovascular Conditions.

20 min. Chauncey D. Leake, Ph.D.

20 min. Paul J. Hanzlik, M.D.

20 min. William Dock, M.D.

20 min. Gordon E. Hein, M.D.

II. William W. Newman, Presiding.

Demonstration of Interesting Roentgenograms of Cardiac Lesions. (Autopsy proven.)

—Harry Garland, M.D.

Demonstration of Gross Microscopic Pathological Specimens of Various Stages of Cardiac Infarction.

—D. A. Wood, M.D.

CALIFORNIA CITIES MAINTAIN LOWEST INFANT MORTALITY RATES

California cities again score in the maintenance of the lowest infant mortality rates for cities in the various classifications of population. Among cities having populations of 250,000 and over, San Francisco in 1934 had an infant mortality rate of 33, the lowest of any cities having similar populations throughout the United States. Portland, Oregon, with a rate of 36, secured the second lowest such rate in this classification of population, and Oakland, with a rate of 40, had the third lowest infant mortality rate among large cities of the United States.

Among cities having populations of 100,000 to 250,000, Long Beach with a rate of 31 had the lowest infant mortality rate of all cities in this classification of population. The next lowest rates among such cities were secured by Lynn, Massachusetts, and New Haven, Connecticut.

Among cities having populations between 50,000 and 100,000, San Jose, with a rate of 19, had the lowest infant mortality rate of all cities having similar populations. New Rochelle, New York, and Evans-ton, Illinois, with rates of 24 and 21, respectively,

followed San Jose in maintaining the lowest such rates among cities having similar populations.

No comparisons have been made for cities with populations of less than 50,000 since many cities reported too few births in 1934 to yield reliable annual rates.

These remarkable records of California cities have been maintained over a considerable period of years. Until this year, northwestern cities have maintained the lowest records among large cities of the United States, but now San Francisco, with the low rate of 33, makes the most favorable record of any large city in the country.

The people of San Francisco, Oakland, Long Beach and San Jose may well be proud of this remarkable record. It is doubtful that any other index to general health conditions can be comparable to that provided by the infant mortality rate. If conditions that are favorable toward the saving of infant lives prevail in any community, it may be regarded, generally, that health conditions for individuals of all ages are equally favorable.

The figures as given in this article, were released by the American Child Health Association of New York City, which issues a statistical report of infant mortality annually. The 1934 report referred to covered 985 cities of the United States.

The urban infant mortality rate for 1934 represents an interruption in the almost constant downward trend in infant mortality throughout the municipalities of the United States. The 1933 rate was exactly one point lower than the 1934 rate. It would appear that in those cities where increased rates are found in 1934, lower rates have prevailed during preceding years. The American Child Health Association comments as follows: "Public health should not slacken its efforts once a low rate has been achieved. Constant vigilance is essential if the low rate is to be maintained."

MORBIDITY

Complete Reports for Following Diseases for Week Ending September 28, 1935

Chickenpox

86 cases: Berkeley 7, Oakland 5, Piedmont 1, Fresno County 1, Kern County 1, Los Angeles County 4, Beverly Hills 1, Huntington Park 1, Long Beach 5, Los Angeles 12, Pasadena 1, Merced County 2, Monterey County 6, Carmel 3, Salinas 1, Santa Ana 3, Beaumont 1, San Diego County 1, National City 1, San Francisco 12, San Joaquin County 3, Stockton 5, San Luis Obispo County 1, San Mateo County 1, South San Francisco 1, Santa Barbara County 1, Santa Barbara 1, Palo Alto 1, Ventura County 1, Santa Paula 1, Marysville 1.

Diphtheria

32 cases: Alameda County 1, Oakland 8, Butte County 1, Fresno County 1, Los Angeles 7, Napa County 1, Orange County 1, Riverside 1, Sacramento 3, Ontario 1, San Bernardino 1, San Francisco 1, Redwood City 1, Lompoc 1, Petaluma 2, Ventura 1.

German Measles

47 cases: Alameda 2, Albany 2, Contra Costa County 2, Fresno 1, Los Angeles County 3, Long Beach 1, Los Angeles 7, Whittier 1, Lynwood 1, San Bernardino 1, San Diego County 1, Escondido 1, San Diego 3, San Francisco 12, Palo Alto 2, Willow Glen 1, Vallejo 1, Sonoma County 4, Tulare County 1.

Influenza

24 cases: Placerville 1, Los Angeles County 1, Burbank 1, Los Angeles 17, Nevada County 1, Grass Valley 1, Stanislaus County 1, Ventura County 1.

Malaria

13 cases: Roseville 1, San Joaquin County 9, Stockton 1, California 2.*

Measles

108 cases: Albany 1, Oakland 2, Butte County 1, Fresno 1, Humboldt County 2, Kern County 2, Los Angeles County 5, Beverly Hills 1, Hermosa 1, Huntington Park 1, Los Angeles 9, San Gabriel 1, Maywood 1, Madera County 2, Madera 7, Monterey County 5, Monterey 1, Pacific Grove 1, Salinas 1, Soledad 1, Grass Valley 2, Orange County 1, Anaheim 1, Riverside 1, Sacramento 1, San Bernardino 1, San Diego County 2, Escondido 5, La Mesa 1, San Francisco 16, San Mateo County 4, Santa Clara County 3, Santa Clara 6, Sonoma County 5, Tulare County 1, Santa Paula 1, Ventura 2, Yolo County 2, Woodland 7.

Mumps

141 cases: Berkeley 5, Oakland 23, Piedmont 5, Amador County 10, Colusa County 3, Colusa 1, Fresno County 3, Kern County 2, Los Angeles County 7, Glendale 1, La Verne 1, Long Beach 4, Los Angeles 15, Sierra Madre 2, Monterey County 1, Nevada County 1, Grass Valley 5, Riverside 1, Sacramento 17, Upland 2, San Diego 1, San Francisco 3, San Joaquin County 1, Stockton 3, San Luis Obispo County 1, Santa Barbara County 2, Santa Maria 1, Watsonville 4, Siskiyou County 1, Sonoma County 10, Stanislaus County 2, Turlock 1, Yolo County 2.

Pneumonia (Lobar)

29 cases: Alameda County 1, Berkeley 2, Bakersville 1, Los Angeles County 1, Glendale 1, Huntington Park 2, Los Angeles 11, South Gate 1, San Diego County 2, Oceanside 1, San Diego 1, San Francisco 5.

Scarlet Fever

121 cases: Alameda County 2, Oakland 2, Butte County 1, Concord 1, Richmond 1, Fresno County 3, Fresno 3, Imperial County 1, Kern County 2, Los Angeles County 11, Alhambra 1, Glendale 1, Glendora 1, Huntington Park 1, Los Angeles 23, Montebello 1, Pomona 1, Bell 1, Salinas 1, Napa County 1, Nevada County 1, Grass Valley 3, Anaheim 1, Placentia 1, Auburn 2, Sacramento County 1, Sacramento 4, Ontario 2, Upland 1, San Diego County 1, Chula Vista 1, National City 1, San Diego 1, San Francisco 16, San Joaquin County 3, Stockton 3, Tracy 1, San Mateo County 1, Redwood City 2, Santa Barbara 1, Santa Clara County 1, Sunnyvale 1, Willow Glen 1, Siskiyou County 2, Yreka 1, Sonoma County 1, Tulare County 4, Tuolumne County 1, Ventura 1, Yolo County 1, Yuba County 1.

Smallpox

No cases reported.

Typhoid Fever

29 cases: Fresno County 2, Imperial County 2, Long Beach 1, Los Angeles 5, Grass Valley 1, Placer County 1, Riverside County 1, San Bernardino County 1, Redlands 1, Upland 1, San Diego 1, San Francisco 1, San Joaquin County 8, Santa Clara County 1, Vallejo 1, California 1.*

Whooping Cough

138 cases: Alameda County 2, Alameda 3, Albany 1, Berkeley 6, Oakland 14, Los Angeles County 13, Burbank 1, Huntington Park 1, Inglewood 1, Los Angeles 18, South Gate 2, Maywood 2, Nevada County 1, Grass Valley 1, Fullerton 2, Placer County 1, Riverside County 1, Chula Vista 1, National City 1, San Diego 9, San Francisco 34, Stockton 16, San Luis Obispo County 1, San Mateo County 2, Santa Barbara County 1, Santa Clara County 1, Ventura County 1.

Meningitis (Epidemic)

2 cases: Long Beach 1, San Diego 1.

Dysentery (Amoebic)

4 cases: Los Angeles 1, Monterey 1, Stockton 1, California 1.*

Dysentery (Bacillary)

11 cases: Los Angeles County 1, Los Angeles 7, Pacific Grove 1, San Francisco 2.

Pellagra

6 cases: Placerville 1, Los Angeles County 2, Upland 1, San Francisco 2.

Poliomyelitis

26 cases: Fresno County 1, Los Angeles County 2, Alhambra 1, Los Angeles 9, Pomona 1, San Francisco 1, San Luis Obispo County 2, San Luis Obispo 1, Santa Cruz County 1, Tulare County 6, California 1.*

Tetanus

2 cases: Maywood 1, Tulare County 1

Trachoma

2 cases: Santa Ana 1, San Diego County 1.

Encephalitis (Epidemic)

6 cases: Contra Costa County 1, San Francisco 1, Davis 2, Woodland 2.

* Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

Hookworm

One case: San Fernando.

Trichinosis

3 cases: Berkeley 1, Los Angeles 2.

Food Poisoning

4 cases: Albany 1, Bakersfield 1, Los Angeles 1, San Francisco 1.

Undulant Fever

2 cases: Santa Barbara 1, Santa Rosa 1.

Tularemia

31 cases reported by San Francisco from C. C. C. Camps in Utah.

Actinomycosis

One case: Los Angeles.

Septic Sore Throat (Epidemic)

One case: San Diego.

Rabies (Animal)

5 cases: Culver City 1, Los Angeles 1, San Fernando 1, National City 2.

Sacramento County 4, Sacramento 1, Redlands 1, San Diego 8, San Francisco 5, San Joaquin County 1, Stockton 2, Paso Robles 1, San Mateo County 2, Redwood City 1, South San Francisco 1, Santa Barbara 2, Santa Clara County 2, Mountain View 4, Palo Alto 1, San Jose 2, Sunnyvale 1, Santa Cruz 2, Trinity County 1, Tulare County 4.

Smallpox

One case: reported by Pasadena from Colorado.

Typhoid Fever

30 cases: Fresno County 1, Fresno 1, Arcadia 1, Los Angeles 12, Merced County 1, Nevada County 1, Riverside County 4, Corona 1, Sacramento County 2, Sacramento 1, San Joaquin County 2, Red Bluff 1, Tulare County 1, Marysville 1.

Whooping Cough

79 cases: Alameda County 2, Alameda 1, Berkeley 1, Oakland 3, Butte County 1, Fresno County 4, Los Angeles County 4, Inglewood 1, Long Beach 2, Los Angeles 11, Monterey County 5, Orange County 3, Newport Beach 1, Orange 2, Santa Ana 1, Placentia 1, San Diego 6, San Francisco 19, Stockton 6, Daly City 3, Santa Barbara County 2.

Meningitis (Epidemic)

3 cases: Los Angeles 1, Modoc County 1, Mountain View 1.

Dysentery (Amoebic)

2 cases: Los Angeles 1, Stockton 1.

Dysentery (Bacillary)

9 cases: Los Angeles County 1, Los Angeles 4, Monterey 1, Sacramento County 1, San Diego 1, San Francisco 1.

Ophthalmia Neonatorum

One case: San Francisco.

Pellagra

One case: Santa Monica.

Poliomyelitis

30 cases: Kern County 4, Los Angeles 11, Pasadena 1, South Pasadena 1, Gardena 1, Merced County 1, Sacramento 3, Santa Clara County 1, San Jose 1, Tulare County 5, California 1.*

Tetanus

3 cases: Los Angeles County 1, Los Angeles 1, Santa Ana 1.

Trachoma

4 cases: Kern County 1, Riverside County 2, San Diego 1.

Encephalitis (Epidemic)

2 cases: San Joaquin County 1, Davis 1.

Paratyphoid Fever

One case: Solano County.

Trichinosis

One case: Los Angeles County.

Food Poisoning

16 cases: Los Angeles 9, San Francisco 7.

Undulant Fever

6 cases: Gridley 1, Kern County 1, Los Angeles 2, South Gate 1, San Bernardino County 1.

Tularemia

One case: from Oregon, reported by San Francisco.

Relapsing Fever

2 cases: El Dorado County 1, Tuolumne County 1.

Rabies (Animal)

8 cases: Los Angeles County 4, Los Angeles 1, San Diego 1, Stockton 2.

* Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

Mumps

136 cases: Alameda County 2, Alameda 1, Berkeley 6, Emeryville 1, Oakland 18, Piedmont 1, San Leandro 1, Gridley 12, Contra Costa County 2, El Cerrito 1, Fresno County 3, Kern County 1, Taft 1, Los Angeles County 1, Covina 1, Culver City 2, Los Angeles 11, Pasadena 1, Torrance 1, Merced County 2, Monterey County 1, Riverside County 1, Beaumont 2, Sacramento County 7, Sacramento 18, San Francisco 5, San Joaquin County 1, Stockton 4, Santa Barbara County 3, Lompoc 5, Yolo County 1, Woodland 2.

Pneumonia (Lobar)

27 cases: Alameda County 1, Oakland 4, Fresno 1, Los Angeles County 2, Glendale 2, Long Beach 1, Los Angeles 7, Bell 1, Orange County 1, Riverside County 1, Colton 1, San Francisco 2, San Joaquin County 1, Stockton 1, Siskiyou County 1.

Scarlet Fever

149 cases: Alameda County 3, Berkeley 1, Oakland 10, Fresno County 5, Fresno 1, Kern County 4, Bakersfield 2, Kings County 3, Hanford 1, Los Angeles County 6, Avalon 1, Beverly Hills 1, Burbank 1, Culver City 1, Glendale 1, Huntington Park 3, Long Beach 5, Los Angeles 30, Montebello 1, Pasadena 7, Santa Monica 2, South Gate 1, Marin County 1, Merced County 2, Gustine 1, Nevada County 4, Orange County 4, Riverside 1,